

- Chronic kidney disease (CKD) is increasingly recognized as a global health problem, and it is associated with an elevated risk in morbidity and mortality. Early detection and effective management of renal dysfunction are needed to reduce the burden of CKD.
- Serum uric acid (SUA) is excreted primarily via the kidneys, and hyperuricemia has been linked to renal dysfunction, hypertension, and diabetes.
- This review discusses the current evidence on the relationship between SUA and CKD, and how SUA-lowering therapies may prevent or delay the progression of CKD.
- Allopurinol and losartan have both been shown to decrease SUA levels. Preliminary data suggest that sodium glucose co-transporter 2 inhibitors, a recent class of antidiabetic agents that act via the kidneys, reducing SUA levels, can potentially improve renal outcomes.

This summary slide represents the opinions of the authors. Sponsorship for this article was funded by Janssen Scientific Affairs, LLC. Medical writing and editorial assistance in the preparation of this manuscript was provided by Adriana Stan, PhD, of Excerpta Medica. For a full list of acknowledgments and disclosures for all authors of this article, please see the full text online. © The Author(s) 2015. Creative Commons Attribution Noncommercial License (CC BY-NC).